

The Nursing Homes (NH) program provides services for Medicaid eligible clients residing in state licensed nursing homes.

Forecast Comparisons (Fiscal Year Averages)								
	Feb-06	Jun-06	Feb to Jun	Percent				
Fiscal Year	Forecast	Forecast	Difference	Difference				
2006	11,843	11,935	92	0.8%				
2007	11,400	11,667	267	2.3%				
2008	11,053	11,385	332	3.0%				
2009	10.705	11.108	403	3.8%				

The Nursing Homes forecast for June 2006 is higher than the February 2006 forecast by 2.3 percent for FY 2007. This upward adjustment is due to a slower than anticipated decline in the Nursing Homes caseload over the past several months and to a lower estimate of savings for the Chemical Dependency Treatment Expansion program.

Nursing Homes

Tracking the February 2006 Forecast

Feb-06			Percent
Forecast	Actual	Variance	Variance
11,988	12,114	126	1.1%
11,910	12,053	143	1.2%
11,810	11,965	155	1.3%
11,746	11,943	197	1.7%
	Forecast 11,988 11,910 11,810	Forecast Actual 11,988 12,114 11,910 12,053 11,810 11,965	Forecast Actual Variance 11,988 12,114 126 11,910 12,053 143 11,810 11,965 155

Nursing Homes FTEs are tracking, on average, 1.3 percent above the February 2006 forecast for the past four months.

Nursing Homes Fiscal Year FTE Change

	Caseload	Percent		
Fiscal Year	Change	Change		Caseload
2004-2005	-362	-2.9%	Actual	12,084
2005-2006	-149	-1.2%	Forecast	11,935
2006-2007	-268	-2.2%		11,667
2007-2008	-282	-2.4%		11,385
2008-2009	-277	-2.4%		11,108
	2004-2005 2005-2006 2006-2007 2007-2008	Fiscal Year Change 2004-2005 -362 2005-2006 -149 2006-2007 -268 2007-2008 -282	Fiscal Year Change Change 2004-2005 -362 -2.9% 2005-2006 -149 -1.2% 2006-2007 -268 -2.2% 2007-2008 -282 -2.4%	Fiscal Year Change Change 2004-2005 -362 -2.9% Actual 2005-2006 -149 -1.2% Forecast 2006-2007 -268 -2.2% 2007-2008 -282 -2.4%

Nursing Home FTEs are expected to decline 2.2 percent (or by 268) over FY 2007.

Risk Assessment:

There is a moderate risk that the Nursing Homes forecast is too low due to a further slowing of the decline in the Nursing Homes caseload and to the inability to accurately assess Nursing Home FTE savings from the Chemical Dependency Treatment Expansion program.